

see a specialist—I gather, to confirm the diagnosis. I don't know. As her symptoms worsened, she decided to visit the Mayo Clinic in Arizona. So she left her home country, paid her way down to Arizona and paid for the diagnosis and treatment that was called for in her case to prevent the permanent vision loss and potentially death that could have ensued had she not been treated in a timely fashion.

A Lindsey McCreith, also of Ontario, was profiled in the same article to which I referred. Mr. McCreith suffered from recurring headaches and seizures. When he went to the doctor, he was told the wait time for an MRI was 4½ months. Think about this. You are having seizures and the test that will reveal what if anything is wrong is going to be delayed 4½ months. One of the reasons, I am told, by the way, is that there are very few places in Canada where MRIs are located, where you can actually get the test. In any event, he decided to visit a clinic in Buffalo, NY—fairly nearby—in order to get the MRI. He did and it, too, revealed a brain tumor. Now Mr. McCreith is suing the Canadian Government's health care monopoly for jeopardizing his life.

I wonder if we want lawsuits to be the answer. When you can't get the care you want, you have to file a lawsuit to get it? Is that what we want in America? I don't think so.

There are also people whose care has been flatout denied. Britain's National Health Service has denied smokers treatment for heart disease, and it has denied hip and knee replacements for people who are deemed to be obese. The British Health Secretary, Patricia Hewitt, has said it is fine to deny treatment on the basis of lifestyle.

[Doctors] will say to patients: "You should not have this operation until you have lost a bit of weight," she said in 2007.

That is easier said than done for some people. In any event, if they need a health treatment and they need it now, there is a real question whether they can accomplish the "losing a little bit of weight," as Ms. Hewitt said. All Americans deserve access to quality care, but government-run insurance does not equate with access. Rationing will hinder access.

As I said, my colleague from Illinois, the distinguished majority assistant leader, says you can actually find some examples in the United States where there are long wait times. If that is true—and I don't doubt what he said—that is not good; it is bad. We should try to fix that so we don't have wait times. We should not justify having more wait times on the fact that we already have some. We should not say because there are some people in America who have to wait, therefore we should make it possible for everybody in America to have to wait; we should be like Canada or Great Britain.

That is not the answer. If we have wait times here, we should stop it, not say that we, therefore, might as well be

like Canada or Great Britain. Americans do not deserve or want health care that forces them into a government bureaucracy with its labyrinth of complex rules or regulations.

Think about the hassles of dealing with the IRS or Department of Motor Vehicles or Social Security Administration when you have a problem there and then imagine dealing with the same issues when it comes to getting health care. We can't enable a panel of bureaucrats, through rules and regulations, to put the politicians in charge of deciding who is eligible for a particular treatment or deciding when or where they can get it. It is wrong for America, wrong for the patients in America, and it is the wrong approach to health care reform.

Republicans believe there is a better way for health care reform. Rather than empowering the government, empower patients. Rather than putting bureaucrats in between your doctor and yourself, try to remove the constraints that physicians have and hospitals have for treating people. Try to remove constraints on insurance companies.

One of the things I have asked for, for example, with all of these wonderful ideas about more government regulation of insurance is, how about repealing some laws that currently prevent insurance companies from competing? I mentioned before you can't compete across State lines.

We all know if you want to incorporate as a corporation—why are all the corporations incorporated in Delaware, "a Delaware corporation"? It doesn't matter whether you are in Illinois or Arizona, corporations are incorporated in Delaware. At least that is the way it used to be. One of the reasons is Delaware had very benign laws regulating the incorporation of businesses. It was cheaper to do it, and there was less regulatory hassle. But if the distinguished Presiding Officer, for example, looked across the river to the west and saw an insurance company in Iowa that could provide him with better coverage at less cost than the company that insures him in Illinois, why should he be restrained from buying the policy from the company in Iowa? You could buy your automobile insurance that way. You could buy your home insurance that way. Why should you not be able to buy your health insurance that way? Well, you can't.

I am going to conclude this discussion, but just one idea is to remove some of the barriers to competition that would make it more likely that insurance companies could expand their coverage by competing, be required to compete with lower premiums and/or provide better access to care. It seems logical, and in this country, where people move around all the time—my family just drove all the way across the country from Washington, DC, out to Arizona to visit friends and family and go on to California. We travel all around this country all the

time. We move families, unlike back in the old days. Why can't we have an insurance regime that enables you to buy insurance from another State? It does not make sense; it inhibits competition; it makes prices higher; and it can have the effect of restricting care. Those are the kinds of things we need to do to reform our system, not put more government in charge and not put government between you and what your physician says you need, or even put some time delay between the opportunity to visit your physician when you know you have something wrong with you.

We are going to have more discussion about this in the future, but I want to back up what Senator MCCONNELL from Kentucky has said. Americans don't want government-run insurance companies any more than they want government-run car companies. It seems as though the government is starting to run everything now—from the banks, to the insurance companies, to the car companies. Now we are going to run insurance companies as well for health care. I do not think that is what the American people want.

I think the Senator from Kentucky is exactly right. I think he is right when he says no government-run care and that we should not be rationing care. Those are two of the most critical aspects of the legislation Senator KENNEDY has come forth with and among the things being discussed in the Senate Finance Committee as well. We need to draw a line: Put patients first, not put the government first.

(Mrs. GILLIBRAND assumed the Chair.)

GUANTANAMO

Mr. KYL. Now, Madam President, since I think I have a little bit more time on the Republican side—though if I have colleagues who wish to speak, I will be happy to finish for the moment—I will go for a little bit longer on another subject.

We have had kind of a running debate on the question of closing Guantanamo prison. This is a subject the Senate has spoken on by an overwhelming vote. I think 90-some Senators voted not to close Gitmo. The American people are 3 to 1 opposed to bringing Gitmo prisoners into their State. They are 2 to 1, at least, in opposition to closing Guantanamo prison. This is not something on which there is a little bit of doubt. The American people are very much opposed to closing Guantanamo prison and bringing those people to their own States.

Nevertheless, the assistant majority leader and five other Democrats voted for the appropriation of money—or the authorization of money—actually, the appropriation of money to close Gitmo and acknowledge that would require bringing many of those people to the United States.

Well, I happen to agree with Senator MCCONNELL that this is a bad idea, and